PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004									Application or Docket Number $10/5f771f$				
		CLAIMS	AS FILED -					SMALL EN	TITY	OR		OTHER THAN SMALL ENTITY	
U.E	3. NATIONAL	STAGE FEES	(00	(Coldinii 1)		(Column 2)		RATE	FEE	7	RATE	FEE	
	SIC FEE		SMALL ENT	T. = \$ 150	LAF	RGE ENT. = \$ 300	1	BASIC FEE	<del>                                     </del>		BASIC FEE	FEE	
<b> </b> -	AMINATION FE	EE	Satisfies PCT-A	Article 33(1)-	Allo	other situations =	1	EXAM. FEE	<del> </del>	-			
SEARCH FEE			U.S. is ISA = 3 ALL other co	(4) = \$50 / \$100 U.S. Is ISA = \$50 / \$100 ALL other countries = \$200 / \$400		\$ 100 / \$ 200  All other situations = \$ 250 / \$ 500		SEARCH FEE		1	SEARCH FEE	-	
FEE	E FOR EXTRA	SPEC. PGS.		nus 100 =	·	/ 50 <b>=</b>	1	X \$ 125 =		1	X \$ 250 =		
TO1	TAL CHARGEA	BLE CLAIMS	176	inus 20 =			1	X \$ 25 =	<del> </del>	OR	X \$ 50 =	-	
IND	EPENDENT CL	LAIMS	<del>                                     </del>	- <del>/-/</del>				X \$ 100 =	<del> </del>	OR	X \$ 200 =	<del> </del>	
		DENT CLAIM PRI		1 / - 1			-	+ \$ 180 =	<del> </del>	-	<b></b>	<del>                                     </del>	
	<del></del>	~~~		n enter "0	in ç	olumn 2	<b>J</b>	TOTAL		OR	+ \$ 360 =	<del> </del>	
* If the difference in column 1 is less than zero, enter "0" in column 2									<u></u>	]	IOIAL	L	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY			•		
NTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE .	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
AMEN	Independent	*	Minus	***		= :		X \$ 100 =	_	OR.	X \$ 200 =		
	FIRST PRES	SENTATION OF M	AULTIPLE DEP	ENDENT C	LAIM			+ \$ 180 =		OR	+ \$ 360 =		
	<u></u>			<del></del>			i· L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
Ì									<del></del>	ţ	Field .	***************************************	
	r <del></del>	(Column 1)	T	(Columi		(Column 3)		<del></del> ;		, ,	<del></del>	·····	
SNTB		REMAINING · AFTER AMENDMENT		NUMBE PREVIOU PAID FO	BER USLY	PRESENT EXTRA		RATE ·	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**	-	=		X \$ 25 =		OR	X \$ 50 =		
AMEN	Independent	<b>*</b>	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
,								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
											,		
***	If the "Highest Nur If the "Highest Nur	umn 1 is less than the imber Previously Paid imber Previously Paid i inber Previously Paid i	ld For" IN THIS SPA ld For" IN THIS SPA	PACE is less ti PACE is less ti	than '20' than '3',	0', enter "20". , enter "3".	In the	appropriate box	in column 1.	,			